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APPLICANTS

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** CONTINUING DATA *****
None (ma)** FOREIGN APPLICATIONS *****
None (ma)

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/02/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	NJ	11	50	7
Verified and Acknowledged Examiner's Signature: <i>Ma. Maher</i> Initials: <i>ma</i>				

ADDRESS

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TITLE

Variable speed, electronically controlled, room air conditioner

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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☐ Other _____☐ Credit _____